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Message: Revised Template

Revised Template

From Kraft, Emily Date Wednesday, April 19, 2017 2:38 PM

To Angel McDonald

Cc

MR Invoice Template.xlsx (15 Kb HTML)

Here you go!

Emily Kraft

Alternatives to Abortion Program Manager Truman Building, Room 430 Jefferson City, MO 65102

Phone: (573) 522-0003

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Invoice

	A	В	С	D	Alternatives to Abortion	F	G	Н	I	J	K	L	M
1 2					<u>Invoice</u>								
3	Contract #	CS170042008					Vendor Name:	Moth	er's R	efug	ge		
4	Vendor Number:	43145462800/M	IB0009414	14			Vendor Address:	14400 Ste #2	20				
5 6								Indep 64055		nce,	MO		
7	Bill To:	Office of Administration											
8		Commissioner's Office 201 W. Capitol											
9		Ave, Room 125 Jefferson City,											
10 11	Invoice	MO 65101											
	Number: Invoice												
	Date: Service Period:												
15													
16 17 18	Total Contracted Allocation		Prior Invoiced Total		Monthly Award Amount								
19 20	\$ 62,997.08	3	37,198.83	\$ 3	\$ 12,599.42								
	Quarterly expenditure adjustment:				\$ 6,902.77								

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22		
23 24	Total Due:	\$ 19,502.19
25 26	Allocation Remaining	\$ 6,296.06
27 28 29		
	Signature:	
31 32		
32 33		
34		
35		

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